PTO/SB/21 (09-04)

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Under the Panerwork Reduction Act of 1995.	Application Number	10/029,609				
TRANSMITTAL	Filing Date	12/27/2001				
FORM	First Named Inventor	Marcel F. C. Schemman				
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ENCLOSURES (Check all that apply) After Allowance Communication to TC						
Fee Transmittal Form Fee Attached Amendment/Repty After Final Affidavits/dectaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Cartified Copy of Priority Document(s) Repty to Missing Parts/ Incomplete Application Repty to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Ct Remarks Enclosed is a response to an Office and the required fee.	Address	Appear of Appear of Appear (Appear (Appear Other below	I Communication to Board eals and Interferences I Communication to TC I Notice, Brief, Reply Briof) etary information Letter Enclosure(s) (please identify		
	TURE OF APPLICANT, ATTO	RNEY, C	RAGENT			
Firm Name	1 11	•				
Signature James A. Kund						
Printed name James D. Leimbach						
Date April 3, 2005	April 3, 2005 Reg No. 34,374					
I hereby certify that this correspondence is b sufficient postage as first class mall in an em	ERTIFICATE OF TRANSMISS reing facsimile transmitted to the USP1 valope addressed to: Commissioner for	TO or depos	ited with the U	nited States Postal Service with Alexandria, VA 22313-1450 on		
signature	A Kinsh. (
Typed or printed name James D. Leimb			Date	April 3, 2005		

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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U. Complete If Known Effective on 12/06/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/029,809 Application Number RANSMI Filing Date 12/27/2001 Marcel F. C. Schemman For FY 2005 First Named Inventor Exeminer Name Hanh Phan Applicant claims small entity status. See 37 CFR 1.27 2633 Art Unit US010689 TOTAL AMOUNT OF PAYMENT 120.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None ()ther (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1 18 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** SEARCH FEES **FILING FEES Small Entity** Small Entity Small Entity Fees Pakt (\$) Fee (\$) Fog (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 500 100 300 250 150 Utility 130 65 200 100 100 50 Design 160 80 200 100 300 150 Plant 600 300 500 250 Reissuc 300 150 0 0 0 0 200 100 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Muttiple Dependent Claims Fee Patd (\$) Total Claims Extra Claims Fee (\$) Fee Paid (\$) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Indep, Clabris Extre Claims Fee (\$) Fee Paid (3) - 3 or HP = HP = highest number of independent dalms peld for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Your Sheets

Number of each additional 50 or fraction thereof Feq.(3) Total Sheets Extra Sheeta __ (round up to a whole number) X - 100 = / 50 = Four Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 120 Other (e.g., late filing surcharge): Petition for a one month extension SUBMITTED BY Registration No. 34,374 Telephone (585) 381-9983 **Signature** (Attorney/Agent)

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1460. DNOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Name (Print/Type) James D. Lelmbach

Date 04/03/2005